



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS



DEPARTMENT OF CORRECTIONS

Vicente Taman Seman Building
P.O. Box 506506, Saipan, MP 96950
Telephone: (670) 664-9061 Facsimile: (670) 664-9515

Part	Section	Subject	Policy No.	Review Date
Institutional Services	Health Care	Written and Verbal Clinical Orders	4.5.11	
ACA Standard	3-ALDF-4E-05 Continuity of Care			
Consent Decree	Paragraph 54 Develop Facility Policies and Procedures			

I. PURPOSE

To ensure that clinical treatment in correctional facilities is performed pursuant to written or telephone orders.

II. POLICY

It is the policy of the Department of Corrections (DOC) to ensure that inmate/detainee treatment is performed pursuant to written or telephone orders by authorized medical personnel.

III. PROCEDURE

A. The order must include the following information:

1. Inmate name
2. Date of Birth
3. Drug allergies
4. Date
5. Time
6. Order
7. Name of physician

B. All written and telephone orders will be signed by the physician at the time of the written order or for telephone orders during his next scheduled clinical visit.

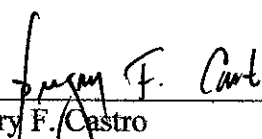
C. The nurse will transcribe the order:

1. Nurse signature and title
2. Bracket the order
3. Date and time of transactions

D. NO BLANK SPACES OR LINES between entries.

E. Physician's written medical orders for inmates/detainees will be followed by the Medical Staff, consistent with the Departments' Policy and Procedures.

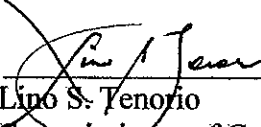
Reviewed By: _____


Gregory F. Castro
Director of Corrections

12/5/07

Date

Approved By: _____


Lino S. Tenorio
Commissioner of Corrections

12/06/07

Date